| PATENT APPLICATION FEE DETERMINATION RECOI | | | | | | | | | Application or Docket Number 10/08/20 15M-20 | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------|--------------|-------------------------------|--------------|------------------|-------|------------------|--------------------------------------------------|--------------------|---------------------|------------------------|--|--|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL TYPE | ENTITY | OR | OTHER | | | |
| TOTAL CLAIMS | | | 16 | | | | | RATE | FEE |] | RATE | FEE | | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | BASIC F | EE 370.00 | OR | BASIC FEE | 740.00 | | |
| TOTAL CHARGEABLE CLAIMS | | | 16 minus 20= | | • 0. | | | X\$ 9= | | OR | X\$18= | 0. | | |
| INDEPENDENT CLAIMS | | | 6 minus 3 = | | 3 | | | X42= | | OR | X84= | 252 | | |
| MU | LTIPLE DEPEN | DENT CLAIM PI | RESENT | | | | | +140= | | OR | +280= | | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | TOTAL | - | OR | TOTAL | 992 | | | |
| 3 | 3 1366 (Column 1) (Column 2) (Column 3) | | | | | | | SMAL | L ENTITY | OR | OTHER SMALL | | | |
| AMENDMENTA (| | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| | Total | . 10 | Minus | ** / | 6 | • | | X\$ 9= | | OR | X\$18= | | | |
| | Independent | NTATION OF MI | Minus | *** | (<u>)</u> | <u> </u> | | X42= | | OR | X84= | | | |
| Ш | FINST PRESE | NIATION OF MI | JUITUE DE | PENDEN | CLAIM | | I | +140= | | OR | +280= | | | |
| | | | | | | | | TÓTA | _ | OR | TÓTAL ADDIT, FEE | | | |
| | | | | | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVK PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| | Total | • | Minus | ** | | * | | X\$ 9= | | OR | X\$18= | | | |
| | Independent | * NTATION OF MI | Minus | *** | C) AINA | • | | X42= | | OR | X84= | | | |
| Ŀ | rinsi Prese | MIATION OF ME | JLI IPLE DE | PENDEN | CEAIM | | | +140= | | OR | +280= | | | |
| | | | | | | | | TOTA DOIT. FE | | ا _{مدا} ا | TOTAL ADDIT, FEE | | | |
| | | (Column 1) | | (Colur | nn 2) | (Column 3) | | OUII. FE | | | | | | |
| AMENDMENT C | | CLAIMS REMAINING AFTER AMENDMENT | | HIGH NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE | | |
| | Total | • | Minus | ** | | a | | X\$ 9= | | OR | X\$18= | | | |
| | Independent | • | Minus | *** | | B. | ŀ | X42= | 1 | OR | X84= | | | |
| Ľ | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | - | • | | 1 | | | | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | | | | | | | | | | OR | +280= | | | |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | | | |